

CJA 23
(Rev. 11/11)

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT, OR OTHER SERVICES WITHOUT PAYMENT OF FEE

IN THE UNITED STATES ☐ DISTRICT COURT ☐ COURT OF APPEALS ☐ OTHER (Specify below) **FILED**

IN THE CASE OF USA v. DoH

FOR _____

AT _____

LOCATION NUMBER _____

JUL 09 2014

PERSON REPRESENTED (Show your full name)
Oliver Doff

CHARGE/OFFENSE (describe if applicable & check box →) ☐ Felony ☐ Misdemeanor
Conveying a False Threat

1 ☒ Defendant - Adult
2 ☐ Defendant - Juvenile
3 ☐ Appellant
4 ☐ Probation Violator
5 ☐ Supervised Release Violator
6 ☐ Habeas Petitioner
7 ☐ 2255 Petitioner
8 ☐ Material Witness
9 ☐ Other (Specify) _____

CLERK, U.S. DISTRICT COURT
SOUTHERN DISTRICT OF ILLINOIS
EAST ST. LOUIS OFFICE

District Court
Court of Appeals

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Self-Employed	
	Name and address of employer: _____	
	IF YES, how much do you earn per month? \$ _____	IF NO, give month and year of last employment? <u>early 90's</u> How much did you earn per month? \$ _____
	If married, is your spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
INCOME & ASSETS	If you are a minor under age 21, what is the approximate monthly income of your parent(s) or guardian(s)? \$ _____	
	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	OTHER INCOME	RECEIVED SOURCES IF YES, give the amount received and identify the sources \$ _____ <u>has worked at local stores/clubs</u> <u>sweeping & cleaning for about \$50/day</u>
	CASH	Do you have any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, total amount? \$ _____
PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	IF YES, give value and description for each	VALUE DESCRIPTION
	\$ _____	_____
	\$ _____	_____

OBLIGATIONS & DEBTS	DEPENDENTS	<input checked="" type="checkbox"/> MARITAL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated or Divorced		Total No. of Dependents <u>1</u>	List persons you actually support and your relationship to them <u>3 yr old daughter</u>
DEBTS & MONTHLY BILLS <small>(Rent, utilities, loans, charge accounts, etc.)</small>	DESCRIPTION		TOTAL DEBT	MONTHLY PAYMENT	
	\$ _____		\$ _____	\$ _____	
	\$ _____		\$ _____	\$ _____	
	\$ _____		\$ _____	\$ _____	

I certify under penalty of perjury that the foregoing is true and correct.

+ Oliver Doff
SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

7/9/14
Date